POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	*Chr*	67814	2/2/00
O.I.P.E. CLASSIFIER		15 2/6 00	
FORMALITY REVIEW	SVB	66343	04/03/00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✔	.... Rejected	N	.... Non-elected
=	.... Allowed	I	.... Interference
—	(Through numeral)... Canceled	A	.... Appeal
÷	.... Restricted	O	.... Objected

Claim		9-75-03	4/21	Date						Claim		Date							Claim		Date						
Final	Original									Final	Original								Final	Original							
1	✔	✔								51									101								
2	J	✔								52									102								
3	J	✔								53									103								
4	J	✔								54									104								
5	J	✔								55									105								
6	J	✔								56									106								
7	J	✔								57									107								
8	J	✔								58									108								
9	J	✔								59									109								
10	J	J								60									110								
11	J	J								61									111								
12	J	J								62									112								
13	J	J								63									113								
14	✔	J								64									114								
15	J	J								65									115								
16	J	J								66									116								
17	J	J								67									117								
18	J	J								68									118								
19	J	✔								69									119								
20	✔	✔								70									120								
21	✔	J								71									121								
22	J	J								72									122								
23	J	J								73									123								
24	J	J								74									124								
25	J	J								75									125								
26										76									126								
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47										97									147								
48										98									148								
49										99									149								
50										100									150								

If more than 150 claims or 10 actions
staple additional sheet here

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